

# Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Fingure OF NEW BEDFORD

of Massachusetts	Commission		
Fill in Reporting Period dates: Beginning Date:	19,2018 Ending PARD DEC 31,2013		
Till in Reporting 1	COMMISSIONER		
Type of Report: (Check one)			
1 * -	30 day after election year-end report dissolution		
8th day preceding preliminary 8th day preceding election	50 day water		
Control Control	BRIAN K. GOMES		
BRIAN K. GOMES  Candidate Full Name (if applicable)	Committee Name		
	KATHY T. GOMES		
COUNCILLOR-AT- LARGE	Name of Committee Treasurer		
Office Sought and District	Name of Community		
66 CLARA ST.	66 CLARA ST.		
Residential Address	Committee Mailing Address		
	Telephone Number (optional):		
Telephone Number (optional):			
SUMMARY BALANCE	INFORMATION:		
Line 1: Ending Balance from previous report	3,544,85		
•	100.00		
Line 2: Total receipts this period (page 3, line 11)			
Line 3: Subtotal (line 1 plus line 2)	3,644.85		
Line 3: Subtotal (line 1 plus line 2)	44 1 47		
Line 4: Total expenditures this period (page 5, line	3,644.85 1,007.67 2,637.18		
	0 / 37 18		
Line 5: Ending Balance (line 3 minus line 4)	2,637.76		
- this paried (page	60		
Line 6: Total in-kind contributions this period (pag			
Line 7: Total (all) outstanding liabilities (page 7)	0		
Line 7. Total (air) occidents and	THE TELESCOPE OF THE PARTY OF T		
Line 8: Name of bank(s) used: FIRST CITZ	ENS FEDERAL CREDIT GINTON		
NEW NEW	DFORO 1.44.		
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of the certify that I have examined this report including attached schedules and it is, to the best of the certify that I have examined this report including attached schedules and it is, to the best of the certific that I have examined this report including attached schedules and it is, to the best of the certific that I have examined this report including attached schedules and it is, to the best of the certific that I have examined this report including attached schedules and it is, to the best of the certific that I have examined this report including attached schedules and it is, to the best of the certific that I have examined this report including attached schedules and it is, to the best of the certific that I have examined this report including attached schedules and it is, to the best of the certific that I have examined the certific that I	of my knowledge and belief, a true and complete statement of all campaign finance		
I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind or finance activity of all persons acting under the authority or on behalf of this committee in a	ontributions and liabilities for this reporting period and represents the campaign		
finance activity of all persons acting under the authority of oil behalf of this sommeter			
Signed under the permitted of			
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	conly)		
Candidate with Committee and no activity independent of the committee	hand of my knowledge and belief a true and complete statement of all campaign finance		
I certify that I have examined this report including attached schedules and it is, to the	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.		
incurred any liabilities nor made any expenditures on my behalf during this reporting	F		
Candidate without Committee OR Candidate with independent activity filing se	parate report		
I certify that I have examined this report including attached schedules and it is, to the	the descriptions and liabilities for this reporting period and represents the		
finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of the	1000 10 600		
Signed under the penalties of perjury:	(Candidate's signature) Date: AN. 19, 2014		
Signed under the penalties of perjuly.			

### SCHEDULE A: RECEIPTS

 $M.G.L_{\tau}c.$  55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	lease include your committee name and a pa Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11-3-13	ROSEMARY S. TIERNEY 322 MAPLE ST. N.B.	100,00	
	eceipts over \$50 (or listed above)	100.00	
	Receipts \$50 and under* (not listed above)  AL RECEIPTS IN THE PERIOD  nized receipts of \$50 and under, include them in	100.00	Enter on page 1, line 2

#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

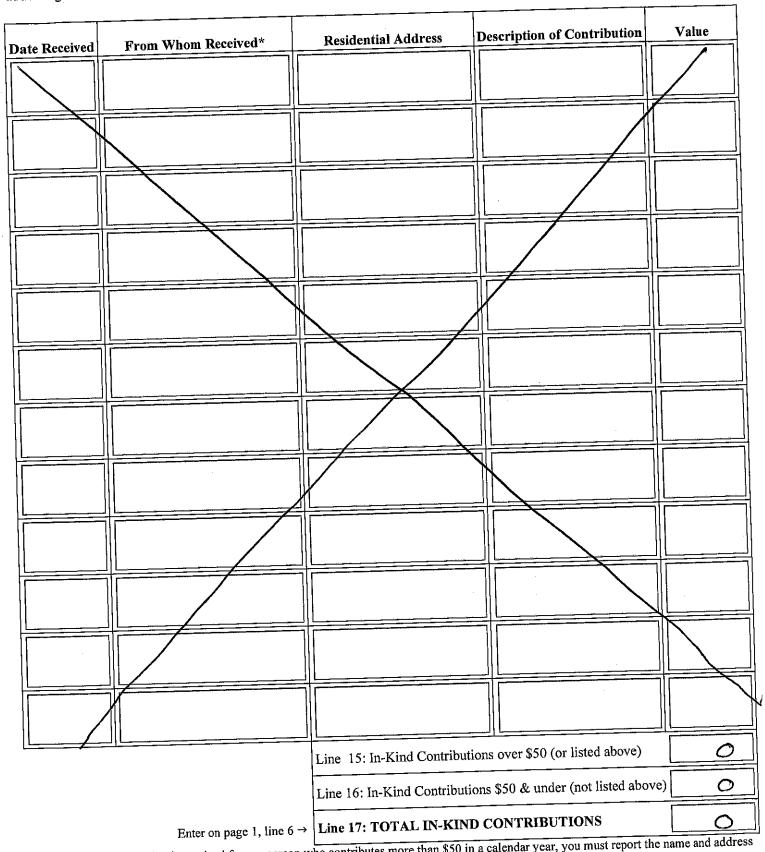
report all expenditures. Please include your committee name and a page number on each page.)						
	To Whom Paid	A 3.3	Daywag of Franco diture	A		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
11-5-13	eno zone		FOOD FORD ELECTION NIGHT	158,23		
12-8-13	DENNISON MEMORIAL CENTER NEW BEDFORD		DONATION	100,00		
//-23-/3	NEW BEDFORD ROUCE ASSO.		POLICE MAN BALL	60,00		
10-28-13	SPRINT PHONE	ATLANTA, GA.	PHONE	277.95		
12-26-13	SPRINT PHONE	11 11	PHONE	135,50		
		AGRICA				
	Line 12: Total Expenditures over \$50 (or listed above)  73			731,68		
		Line 13: Total Expenditures \$50 and under* (not listed above)				
	Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD  [1007.67]					
* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized						

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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# SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.



\* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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## SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

